NAME & PHONE OF CONTACT AT FILER [optional] aylon Mikula 205-226-1402 SEND ACKNOWLEDGMENT TO: (Name and Address) Alabama Power Company 600 18th St N Birmingham, AL 35203 THE ABOVE SPACE IS FOR FILING OFFICE INITIAL FINANCING STATEMENT FILE # 20110124000024720 THE ABOVE SPACE IS FOR FILING OFFICE To be filed (by record) for the beful filed above is terminated with respect to security interest(s) of the Secured Party authorizing this Terminated of the additional period provided by applicable law. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in item 7c; and also give name of assignor in items AMENDMENT (PARTY INFORMATION): This Amendment affects Debtor of Secured Party of record. Check only ong of these two boxes. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in item 7c; and also give name of assign or in items AMENDMENT (FARTY INFORMATION): This Amendment affects Debtor of Secured Party of record. Check only ong of these two boxes. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and/or new address (if address change) in item 7c. To be deleted in item 6a or 6b. CURRENT RECORD INFORMATION: 6a ORGANIZATION'S NAME BELETE name: Give record name in item 7c, also complete it item 7c, also complete item 7c, also complete item 7c, also complete item 7c, also complete item 7c, and address file address change) in item 7c. To ORGANIZATION'S NAME MIDDLE NAME DOUGLAS CHANGE (NEW) OR ADDED INFORMATION: 7a ORGANIZATION'S NAME	JSE ONLY ENT AMENDMENT ecorded) in the
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AMENDMENT (COLLATERAL CHANGE): check only <u>one</u> box.	

UCC FINANCING STATEMENT AMENDMENT ADDENDUM FOLLOW INSTRUCTIONS (front and back) CAREFULLY 11. INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form) 20110124000024720 12. NAME OF PARTY AUTHORIZING THIS AMENDMENT (same as item 9 on Amendment form) 12a. ORGANIZATION'S NAME Alabama Power Company OR | Alabama Power Company | FIRST NAME | MIDDLE NAME, SUFFIX

13. Use this space for additional information

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